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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/451,174 02/28/2003 *SL*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none SL*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/15/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	CO	18	64	5
Verified and Acknowledged	<i>SL</i> Allowance Examiner's Signature	Initials			

## ADDRESS

23910

## TITLE

Systems and methods for context-sensitive editing

FILING FEE RECEIVED 1864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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